

COUNTY COUNCIL OF DURHAM.

EDUCATION COMMITTEE.

Ninth Annual Report

— of the —

School Medical Officer,


T. EUSTACE HILL, M.A., M.B., B.Sc., F.I.C.,

For the Year 1916.



NEWCASTLE-ON-TYNE :
CO-OPERATIVE PRINTING SOCIETY LIMITED, *RUTHERFORD STREET ;
ALSO AT MANCHESTER AND LONDON.

1917.



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COUNTY COUNCIL OF DURHAM.

Education (Medical) Department.

NINTH

Annual Report of the School Medical Officer.

LADIES AND GENTLEMEN,

I.—MEDICAL INSPECTION STAFF.

During the past year the staff of the School Medical Department was still further reduced, owing to the resignation of Dr. Boleyn, towards the end of 1915, and the work was carried on by the School Medical Officer, assisted by three lady medical inspectors, one of whom (Dr. Niel) assisted the School Medical Officer in discharging the duties of the chief assistant, who is on active service. With such a small staff it was quite impossible to undertake the routine inspection of children at certain age periods, and the work during the greater part of the year was again limited to the examination of ailing and defective children, and the re-inspection of children found to be defective at previous examinations. During the last quarter of the year, however, time was found to examine "Entrants" at a number of the schools, and particulars of these inspections will be found in this report.

II.—NUMBER OF SCHOOLS, DEPARTMENTS, ETC., IN THE COUNTY.

There are now 400 elementary schools: 248 being provided and 152 non-provided schools, making a total of 709 departments. The accommodation provided in these schools is for 169,860, although the actual number of scholars on the roll was 143,732, the average attendance during the year being 128,285. Two new permanent and two temporary schools were opened during the year.

In some districts, owing to the schools being required for military purposes, there was some interference with educational work, and on account of military occupation seven schools were not visited by the school medical inspectors. Nearly all the schools occupied by the military authorities were situated in the Seaham Harbour area.

III.—INSPECTIONS AND FOLLOWING UP.

During the year 391 schools, comprising 692 departments, were visited by the school medical inspectors.

“Entrants” were examined in 35 schools, and re-inspections were carried out in 577 departments of 385 schools. The “Entrants” and “Specials” primarily examined numbered 2,529 and 5,522 respectively, and the number of children re-inspected was 11,251.

In accordance with the suggestion made by the Board of Education, an attempt was made by the health visitors to select the ailing and defective children for examination by the school medical inspectors, but it was found that this involved too great a demand on the time of the health visitors, and it was necessary to continue the old arrangement by which the selection of school children to be inspected was left to the head teachers. I quite agree with the Board of Education that the selection of such children should be in the hands of the health visitors rather than the teachers, but our staff of health visitors has other important duties to perform, such as the supervision of cases of tuberculosis, and the administration of the Notification of Births Act. The staff of health visitors, though it was increased towards the end of the year from 26 to 32, is still insufficient for the purpose, and seeing that only about one-fifth of their available time is at present devoted to the performance of school nurse's work, it is obvious that it was impossible for them to visit over 700 departments for the selection of the children to be examined.

It is satisfactory to note that an increasing number of parents were present at the routine and special examination of their children: the attendance increasing from 15·4 per cent. to 19 per cent. of the cases examined.

There were no changes during the year in the arrangements for “following up” the children who underwent medical inspection, and the particulars of the work of the health visitors is set forth in Table VII. at the end of the report. From the report of the Superintendent Health Visitor on page 19 it will be seen that 2,770 visits were paid to schools, as compared with 1,932 in the previous year; while the number of home visits to school children increased from 13,569 to 21,432.

Inspections of the heads of children were made in three departments of three schools, and partial inspections were made in many others, but our staff was insufficient to permit of this important work being systematically performed.

Included in this report are Tables I. (a) and (b), Table IV., and a modification of Table II., which the Board of Education request should be embodied in the reports of school medical officers.

IV.—SPECIAL INSPECTIONS, ETC.

The number of special visits paid to schools by the school medical inspectors during 1916 was 42. These visits were generally confined to investigations into outbreaks of communicable diseases, although visits were also paid for such purposes as the examination of mentally and physically defective children. One of the enquiries made by Dr. Niel had reference to the prevalence of mild epidemic jaundice amongst school children at Rookhope, and in some other parts of the Weardale Rural District. The affection appeared to have been somewhat widely prevalent, but fortunately none of the cases were of a very serious character. Dr. Niel reported that it was improbable that there was any connexion between the outbreak and Weil's disease, and in her opinion it was a simple epidemic of catarrhal jaundice.

V.—SUPERVISION OF INFECTIOUS DISEASES.

It is satisfactory to report that during the past year the County education area was remarkably free from infectious disease, this being especially the case in respect to measles, as is evidenced by the fact that while in 1915 there were 1,009 deaths from measles in the administrative county, during the year under review this number fell to 55. In consequence the number of schools closed on that account was comparatively small. Ninety-two departments were closed on account of the prevalence of infectious disease during 1915, and during 1916 only twelve were so closed. Three schools were closed owing to the prevalence of whooping cough; three for mumps; two for diphtheria; two for measles; one for scarlet fever; and one for whooping cough and mumps. The procedure adopted for closing schools was the same as in previous years, and no school was closed by order of the local sanitary authorities under Article 57 of the Code.

VI.—FACTS DISCLOSED BY THE MEDICAL INSPECTION OF THE CHILDREN.

The results of the inspection are tabulated in the tables at the end of the report, but no table is given for the heights and weights of the children examined, as obviously no such table could serve any useful purpose, seeing that the inspections were for the most part limited to ailing or defective children.

For this reason also it is not possible to compare the figures for 1916 with those for previous years when for the most part the inspections related to children of certain age groups, the majority of whom were free from

defects ; but Table VII., giving the number of cases under the home supervision of the health visitors, supplies some interesting information as to the prevalence of certain affections.

As regards verminous conditions, the number of cases supervised shows a reduction on previous years, and there is definite evidence that these objectionable conditions are much less prevalent than was formerly the case. Acting on my recommendation, the Education Committee decided to take proceedings under Section 12 of the Children Act (1908), against the parents of children who, in spite of warning, remained grossly verminous, and it is very satisfactory that convictions were obtained in every case—36 in number—brought before the magistrates, in some instances the parents being sent to prison. I have no doubt whatever that this action has been beneficial in bringing to a sense of duty many parents who seriously neglected their children in this respect, and I take this opportunity of expressing my appreciation of the valuable assistance given by the teachers in our elementary schools towards removing these objectionable conditions affecting such a large proportion of the children.

An affection which has been exceptionally prevalent during the year in many of our elementary schools is scabies, and it will be noted that 1,901 cases received the attention of the school nurses. The prevalence of this disease has resulted in a considerable loss of attendance of children, and in numerous instances it has had the effect of keeping children from school for many weeks, and even months at a time. The difficulty in stamping out this affection is very great, as it frequently happens that not only school children, but other members of their family are affected, and the children consequently get re-infected. All the same, if school clinics were available, much loss of attendance from this objectionable condition would be avoided.

There was a considerable increase in the number of tuberculous children under the supervision of the school nurses, 1,088 cases being reported. This figure includes a large number of cases which were under supervision in previous years, and were not inspected by the school medical officers, and this accounts for the number being so much in excess of those given in Tables II. and IV.

VII.—RE-INSPECTIONS.

From Table IV. it will be noted that there were 11,251 children re-inspected in respect of 17,259 defects, as compared with 12,077 children and 16,129 defects in 1915. The percentage of defects which received treatment was 38·47, but it will be noted that in respect of 2,657 defects no information is available.

VIII.—CHILDREN EXCLUDED FROM SCHOOL.

The number of children temporarily excluded from school by the School Medical Officer under Article 53(b) of the Code was 2,925. A large number of these were on account of tuberculous or pre-tuberculous conditions. There was a very marked reduction in the number of exclusions on account of infectious disease. For instance, in 1915, 1,399 children were temporarily excluded on account of scarlet fever; 207 on account of diphtheria; and the number of exclusions of contacts of infectious diseases was 991. The respective figures for 1916 were 177, 124 and 291. This diminution is partly due to a reduction in the prevalence of these diseases, but more especially, I fear, to the fact that medical officers of health have, owing to the stress and disorganisation resulting from war conditions, omitted to notify the cases which they excluded, and whose exclusions should have been confirmed by the School Medical Officer.

The number of children permanently excluded increased from 39 to 89.

At the end of the report will be found a table giving particulars of the causes necessitating temporary and permanent exclusion of children.

IX.—ARRANGEMENTS FOR MEDICAL TREATMENT.

As far as possible the special examination of children reported by the assistant school medical officers to be suffering from defective eyesight and requiring treatment, was carried on during 1916. Dr. Lillie Johnson, who has had very considerable experience in ophthalmic work, visited certain schools, where special facilities had been provided for the treatment of eye defects, on two days per week, while the arrangement with Dr. Maling, Senior Honorary Surgeon to the Sunderland Eye Infirmary, referred to in my last annual report, was also continued. At the end of the report will be found a short report by Dr. Johnson, and also a tabulated statement of the cases treated. In necessitous cases free spectacles are provided out of a special fund, while a uniform charge of 3/6 is otherwise made in respect of each child supplied with spectacles through the Education Committee.

No school clinics have yet been instituted in the County Education Area, although the matter was considered by the Education Committee during the year, but it was realised that insuperable difficulties existed, and will continue to exist during the continuance of the war. At the request of the Committee I presented a further special report on the matter, and my recommendations were very favourably received. Eventually the Clerk to the Education Committee and myself were requested to prepare a scheme of school clinics for the County Education Area, with an estimate of cost and other particulars, and in the meantime I was authorised to enquire of the Committees of voluntary hospitals in the county and its neighbourhood as to whether they would be prepared to provide treatment

for such affections as enlarged tonsils, adenoids, eye and ear affections, etc., for children in the County Education Area urgently in need of attention. The replies I have so far received from the hospital authorities indicate that at many of the institutions it is impossible under present conditions to provide such treatment, and in any case, I must again emphasise my opinion that our school medical work will not be effective until school clinics are established throughout the county. The County Council has recently authorised the County Health Committee to prepare a scheme of maternity and child welfare for the County Area, and I am satisfied that the best arrangement would be to utilise the same clinic for maternity and child welfare work as well as for children of school age.

During 1916 the provision for the sanatorium and hospital treatment of tuberculosis among children of school age was very considerably extended, and nearly 100 beds are now available in various sanatoria for the treatment of children affected with pulmonary tuberculosis. Arrangements were continued with the Committees of a number of voluntary hospitals for the surgical treatment of cases on non-pulmonary tuberculosis. In addition, arrangements were completed by which the children sent from the County Area to the Stannington Sanatorium, Northumberland, and the County Sanatorium at Holywood Hall, are educated.

X.—MENTALLY DEFECTIVE CHILDREN.

No further progress has been made towards providing treatment in the County Education Area, either for mentally or physically defective children, though there is very urgent need for action in this respect. Numerous cases have been brought to my notice of mentally defective children who require special treatment, and who are not only a danger to themselves, but also to the community.

The conditions prevailing on account of the war have prevented any action being taken by the Education Committee to erect a building on the site purchased at Glake Hall, near Durham, for the accommodation of mentally defective children, and it has also been impossible to obtain adequate treatment of such children in outside institutions.

Less urgent perhaps, but very necessary, is the provision of means for accommodating and treating children suffering from physical defects.

XI.—SPECIAL SCHOOLS AND CLASSES.

There are none of these in the County Area at present, but as far as possible children requiring special treatment, such as those who are blind and deaf, are sent to outside institutions. During 1916 eighty children were maintained by the Education Committee at a total cost of £2,099 2s. 0d.

The provision of open-air classes or schools for children suffering from malnutrition, debility, and also what may be called pre-tuberculous children, is greatly needed.

XII.—ARRANGEMENTS FOR FEEDING OF CHILDREN.

It was not found necessary during the year to provide meals for school children in any part of the County Education Area.

XIII.—HYGIENE AND PHYSICAL TRAINING.

I have nothing to add to the remarks contained in my last annual report, but I am glad to note that this important matter is being pushed by the Board of Education, and it is to be hoped that a satisfactory scheme with which the School Medical Department is associated, as suggested in Circular 976, issued by the Board of Education in February last, will be adopted in the County Education Area at no distant date.

XIV.—SCHOOL SANITATION.

The practice of previous years, by which the assistant school medical officers when visiting a school enquired into and reported on its sanitary conditions was followed during 1916, and any defect requiring attention was brought to the notice of the Clerk to the Education Committee. I have reason to believe that as far as possible such defects received the necessary attention. One defect of some importance frequently mentioned by the assistant school medical officers in their sanitary reports is the insufficient warming of school premises during the winter months, and I am afraid there is undoubted evidence that in many schools the appliances for heating are insufficient to secure the necessary warmth in severe wintry weather.

The erection of new schools was practically at a standstill throughout the year, and no plans were submitted to me as School Medical Officer.

XV.—EXAMINATION OF PUPIL TEACHER CANDIDATES.

The school medical staff examined 72 boys and 263 girls during the year. One boy was rejected on account of otorrhœa; 11 were provisionally accepted subject to defects other than teeth receiving attention, and the remainder were passed. Of the girl candidates, one was rejected on account of enuresis; one owing to heart disease; and two on account of goitre, while 43 were provisionally accepted subject to defects other than teeth receiving attention, and the remainder were passed.

There were a very large number of candidates whose teeth were unsatisfactory, and no less than 26 boys and 85 girls had four or more carious teeth, with, in not a few cases, accompanying oral sepsis.

A number of the candidates were unvaccinated, and a very large proportion had never been re-vaccinated.

I am,

Your obedient servant,

T. EUSTACE HILL.

21st May, 1917.

TABLE I.

NUMBER OF CHILDREN INSPECTED 1ST JANUARY, 1916, TO 31ST DECEMBER, 1916.

(a) "CODE" GROUPS.

Age	Entrants.				Leavers.					Grand Total.
	5	6	Other Ages.	Total.	12	13	14	Other Ages.	Total.	
Boys	601	523	102	1,226	..	..	..	..	..	1,226
Girls.....	646	560	97	1,303	..	..	..	..	..	1,303
Totals	1,247	1,083	199	2,529	..	..	..	..	..	2,529

(b) GROUPS OTHER THAN "CODE."

	Intermediate Group (other than eight years).	Special Cases.	Re-examinations (i.e. Number of Children Re-examined).
Boys	2,383	....
Girls	3,139	....
Totals	5,522	11,251

TABLE II.

RETURN OF DEFECTS FOUND IN THE COURSE OF MEDICAL INSPECTION.

DEFECT OR DISEASE.		CODE GROUPS.		SPECIALS.	
		Number referred for treatment.	Number requiring to be kept under observation, but not referred for treatment.	Number referred for treatment.	Number requiring to be kept under observation, but not referred for treatment.
	Malnutrition.....	344	..	900	..
	Uncleanliness :—				
	Head	141	37	331	82
	Body	63	..	157	..
<i>Skin</i>	{ Ringworm—Head	29	..	92	..
	Body	4	..	11	..
	{ Scabies	13	..	101	..
	{ Impetigo	57	..	227	..
<i>Eye</i>	{ Other Disease	24	..	154	..
	{ Defective Vision and Squint	52	..	1270	259
<i>Ear</i>	{ External Eye Disease	71	8	384	98
	{ Defective Hearing .....	..	..	88	130
<i>Nose and Throat</i>	{ Ear Disease	28	3	216	13
	{ Enlarged Tonsils	110	218	240	356
	{ Adenoids.....	30	39	272	209
	{ Enlarged Tonsils and Adenoids.....	..	..	..	..
<i>Heart and Circulation</i>	{ Defective Speech .....	..	31	..	200
	{ Heart Disease—				
	Organic .....	..	10	..	59
	Functional .....	..	3	..	34
<i>Lungs</i>	{ Anæmia	16	..	181	..
	{ Pulmonary Tuberculosis—				
	Definite	2	..	81	..
	Suspected .....	..	6	..	113
<i>Nervous System</i>	{ Chronic Bronchitis	23	..	64	..
	{ Other Disease	65	..	124	..
	{ Epilepsy .....	..	..	27	..
	{ Chorea.....	1	..	38	..
	{ Other Disease	7	..	83	..
	Non-Pulmonary Tuberculosis—				
	Glands.....	2	..	76	..
	Bones and Joints	6	..	38	..
	Other Forms	1	..	15	..
	Rickets	18	30	58	64
	Deformities	24	3	142	15
	Other Defects or Diseases..	37	81	387	612

TABLE III. (a).

CHILDREN TEMPORARILY EXCLUDED FROM SCHOOL BY THE SCHOOL MEDICAL OFFICER,
AND REASON FOR SUCH EXCLUSION (SEE ARTICLE 53 (b) OF SCHOOL CODE.

Conditions.	No. of Children Excluded.
Vermineous Conditions	77
Ringworm	27
Impetigo	42
Scabies	208
Eczema	10
Tuberculosis (Lungs)	169
Tuberculosis (Lungs) (Suspected)	26
Tuberculosis (Intestinal)	15
Tuberculosis (Osseous).....	47
Tubercular Disease of Hip-joint	28
Tubercular Disease of Knee	28
Tubercular Glands	131
Attending Tuberculosis Dispensaries.....	380
Admitted into Sanatoria	320
Rickets.....	8
Acute Bronchitis	29
Anæmia	37
Heart Affections	49
Inflammation of the Eyes	104
Tonsilitis	18
Chorea	55
Epilepsy.....	9
Otorrhœa	12
Diphtheria	124
Scarlet Fever	177
Contacts with Infectious Disease.....	291
Enteric Fever	4
Whooping Cough	11
Measles.....	5
Chickenpox	6
Mumps	6
Bright's Disease	3
Other Conditions	469
TOTAL.....	2925

TABLE III. (b).

CHILDREN PERMANENTLY EXCLUDED FROM SCHOOL BY THE SCHOOL MEDICAL
OFFICER, AND REASON FOR SUCH EXCLUSION.

Conditions.	Total.
Heart Affection	11
Attending Dispensary	3
Spinal Caries	2
Empyema	1
Mentally Defective.....	14
Epilepsy.....	6
Poor State of Health	6
Tuberculous Ankle	1
Tuberculous Abscesses discharging	2
Paralysis	4
Discharging Sinus, Hip	1
Phthisis ..	17
Debility	5
Acute Rheumatism	1
Otorrhœa	1
Enuresis.....	1
Eye Affection	3
Chorea	2
Nephritis	1
Tubercular Glands	3
Bright's Disease	1
Nævus	1
Deaf Mute	1
Spinal Injury	1
TOTAL.....	89

TABLE IV.
RE-INSPECTION OF CHILDREN FOUND TO BE DEFECTIVE AT THE ROUTINE MEDICAL EXAMINATION.

Number of Schools visited..... 385 Number of Cases Re-inspected 11,251
Number of Departments visited 577 Number of instances when a parent was present 411

CONDITION.	No. of defects found for which treatment was considered necessary			No. of defects for which no report is available.	No. of defects treated.	Results of treatment.			No. of defects not treated.	Percentage of defects treated.
	From previous year.	New	Total.			Remedied.	Improved.	Unchanged		
Clothing	396	8	404	100	176	58	115	3	128	43.56
Footgear	271	8	279	70	130	68	59	3	79	46.59
Cleanliness of head*	3264	46	3310	437	1099	417	595	87	1774	33.2
Cleanliness of body*		8	438	103	269	16	187	66	66	61.41
Nutrition	430	27	3659	498	806	303	448	55	2355	22.03
Nose and Throat	3632	43	1021	145	540	349	128	63	336	52.89
External Eye Disease	978	13	692	64	334	211	56	67	294	48.26
Ear Disease	679	57	1093	191	210	22	147	41	692	19.21
Teeth.....	1036	12	473	119	324	120	113	91	30	68.5
Heart and Circulation	461	25	464	150	296	58	186	52	18	63.8
Lungs	439	2	91	20	50	16	21	13	21	54.94
Nervous System	89	62	1073	184	796	647	99	50	93	74.18
Skin	1011	..	39	4	21	3	17	1	14	53.85
Rickets	39	2	124	25	43	10	25	8	56	34.68
Deformities	122									
Tuberculosis (non-pulmonary	209	5	214	46	148	40	79	29	20	69.16
Speech.....	36	2	38	7	12	1	9	2	19	31.58
Mental Condition	133	5	138	39	30	1	20	9	69	21.74
Vision and Squint	2601	12	2613	350	998	162	612	224	1265	38.19
Hearing.....	272	18	290	48	96	43	31	22	146	33.1
Miscellaneous	769	37	806	57	262	144	76	42	487	32.5
TOTAL	16,867	392	17,259	2,657	6,640	2,689	3,023	928	7,962	38.47

* It has been found necessary to bracket these conditions, as during the earlier part of the year the figures were not given separately.

TABLE V.

NOTICES SENT TO PARENTS AND HEAD TEACHERS REGARDING CHILDREN FOUND TO BE DEFECTIVE AT THE SCHOOL MEDICAL EXAMINATION DURING THE YEAR 1916.

Nature of Notice.	No.
Form 5 (M.I.)— (notice to parents <i>re</i> defects requiring medical advice).....	2439
Form 6 (M.I.)— (notice to parents with directions <i>re</i> cleaning of dirty heads)	1157
Form 8 (M.I.)— (notice to parents—children excluded temporarily from school)	2925
Form 11 (M.I.)— (notice to parents <i>re</i> uncleanness).....	144
Form 11a (M.I.)— (notice to parents <i>re</i> verminous conditions, <i>e.g.</i> , head, body, or clothing)	103
Form 13 (M.I.)— (notice to head teachers <i>re</i> children who are suffering from heart affections and should be excused from drill)	105
Form 14 (M.I.)— (notice to head teachers <i>re</i> children suffering from defective eyesight, and the position in class of such children in order to avoid eye-strain)	1029
TOTAL.....	7,902

SECONDARY NOTICES.—SENT TO PARENTS IN CASES WHERE NO MEDICAL ADVICE HAD BEEN OBTAINED IN RESPONSE TO THE NOTICES MENTIONED ABOVE.

Nature of Notice.	No.
Form 5a (M.I.)	2634
Form 6a (M.I.)	456
TOTAL.....	3,090

Total number of notices issued (First and Secondary)— 10,992

REPORT ON EYE WORK FOR THE YEAR 1916.

By LILLIE JOHNSON, M.B., B.S., B.Sc.

During the year 1916 I have examined 614 children whose eyesight was found defective at school inspections. Eighteen eye centres have been visited, and two days per week have generally been devoted to this work.

Of the cases examined 24 were found to have no refractive error. In 103 cases the defect was due to simple hypermetropia ; in 79 to myopia ; in 262 cases to hypermetropic astigmatism ; in 76 to myopic astigmatism ; and in 47 to mixed astigmatism. There were 61 cases with squint, and six cases suffered from nystagmus. Other defects of minor importance were found, but they have not been classified. Some of the myopic cases had errors of more than seven dioptries, and in one an error of 15 dioptries was found.

There were 20 cases with corneal opacities. Twelve of these had also errors of refraction. Of other defects found 10 suffered from external inflammation, one from cataract, one from congenital absence of iris, one from iritis, and one from choroiditis.

L. JOHNSON.

7th April, 1917.

TABLE VI.

STATEMENT SHEWING NUMBER OF CHILDREN EXAMINED BY SCHOOL OPHTHALMIC SURGEON, NUMBER OF PRESCRIPTIONS ISSUED AND NUMBER OF SPECTACLES SUPPLIED, ETC., DURING 1916.

No. of Cases offered the services of the School Ophthalmic Surgeon.			Number Examined.			Number of Prescriptions Issued.			Number of Spectacles supplied.						Number who preferred own Dr., or had obtained spectacles.	Number not examined for various reasons.			
Reported by A.S.M.O's.	Brought forward by Head Teachers.	Total No. of Cases.	Boys.	Girls.	Total.	Boys.	Girls.	Total.	On Payment.			Free.							
									Boys.	Girls.	Total.	Boys.	Girls.	Total.					
322	459	5	6	792	243	371	614	221	336	557	165	230	395	2	7	9	43	135	
Spectacles supplied during 1916 to children prescribed for in previous years ..																			
Spectacles supplied during 1916 to children prescribed for by Dr. W. H. Maling ..																			
Spectacles supplied during 1916 on prescriptions from private medical practitioners and eye infirmaries ..																			
Total number of spectacles supplied during 1916 ..																			
185										238		423		4		8		12	

REPORT OF HEALTH VISITORS' WORK FOR THE YEAR 1916.

Dirty and Verminous Conditions. Defective Clothing.—Many of these cases are frequently visited after they are reported to be satisfactory to see if the improvement is maintained. This is how the number reported "satisfactory" is sometimes as great, or greater, than the total number of cases under supervision.

Complete or partial head inspections took place in a few schools during the year, lack of time preventing our paying more attention to this important branch of work.

Scabies.—The home supervision of this disease took up a great deal of time, and many special visits were paid to schools to ascertain if any undetected cases were in attendance.

Number of Visits.—There was a large increase in the number of home visits : 21,432, as compared with 13,569 in 1915 ; and 2,770 visits were paid to schools ; the number in 1915 being 1,932.

War Conditions.—The Health Visitors report the children's footwear as very bad in many cases ; it seems very desirable to encourage the wearing of clogs. In some cases the children are underfed, partly as a result of lack of knowledge on the mothers' part as to how to make the best of the cheaper foods available. Special lectures to mothers by the Cookery and Housewifery teachers already working in the county, would, I think, do much good.

Prosecutions under Section 12 of the Children Act.—During 1916, acting under the direction of the School Medical Officer, I instituted proceedings in 36 cases against parents who neglected to keep their children in a cleanly condition. Evidence was given by the Health Visitors, and in every case a conviction was obtained.

H. S. COOPER HODGSON,

Superintendent of Health Visitors.

TABLE VII.

ANALYSIS OF CASES UNDER THE HOME SUPERVISION OF THE HEALTH
VISITORS DURING THE YEAR 1916.

CONDITIONS.	Total Conditions under Supervision.	Total No. of Visits <i>re</i> Conditions.	Total satisfactorily improved
Verminous Head and Body	2,296	5,341	1,929
Dirt	775	1,917	967
Clothing and Boots	772	1,828	853
Teeth.....	104	146	17
External Eye Disease	1,145	1,856	776
Otorrhœa	401	605	129
Nose and Throat	666	980	94
Impetigo	2,340	3,421	1,799
Scabies	1,901	3,544	1,394
Ringworm	753	1,152	471
Tuberculosis (Lungs)	746	1,932	*
Tuberculosis (other forms).....	342	947	*
Visits <i>re</i> Spectacles	850	1,066	**
Other Conditions	1,517	2,798	779
TOTALS	14,608	27,533	9,208

* Conditions *re* which it seemed undesirable for health visitors to express opinion as to whether satisfactorily improved.

** A large proportion of these visits paid to ascertain if parents were willing to have children examined by the School Ophthalmic Surgeon. Others paid to ascertain why spectacles were not purchased.